

Application Data Sheet

Application Information

Application number::	
Filing Date::	04/01/04
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	
Number of copies of CRF::	
Title::	COMBINATION OF AN ALDOSTERONE RECEPTOR ANTAGONIST AND AN ANTI- OBESITY AGENT
Attorney Docket Number::	161765.00039
Request for Early Publication?::	NO
Request for Non-Publication?::	NO
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	NO
Latin name::	
Variety denomination name::	
Petition included?::	NO
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	

Secrecy Order in Parent Appl.?:: NO

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Eric
Middle Name:: Arthur
Family Name:: Gulve
Name Suffix::
City of Residence:: St. Louis
State or Province of Residence:: MO
Country of Residence:: US
Street of mailing address:: 549 Hollywood Place
City of mailing address:: St. Louis
State or Province of mailing address:: MO
Country of mailing address:: US
Postal or Zip Code of mailing address:: 63110

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Ellen
Middle Name:: Garwitz
Family Name:: McMahon
Name Suffix::
City of Residence:: St. Louis
State or Province of Residence:: MO
Country of Residence:: US
Street of mailing address:: 9154 Park Haven Lane

City of mailing address:: St. Louis
State or Province of mailing address:: MO
Country of mailing address:: US
Postal or Zip Code of mailing address:: 63126

Correspondence Information

Correspondence Customer Number:: 22907

Representative Information

Representative Customer Number:: 22907

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/465,213	04/25/03

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name:: Pharmacia Corporation
Street of mailing address:: P.O. Box 1027
City of mailing address:: St. Louis
State or Province of mailing address:: MO
Country of mailing address:: US
Postal or Zip Code of mailing address:: 63006